



Application form for certification of Family Register(by mail)

※Please fill in all the necessary items.

To the Mayor of Naha

DATE year month day

Whoce certificate do you need?	本籍地 Location of family register/Registered domicile	Naha City		
	筆頭者 The first person listed on the family register. It stays the same even in the event of the person's death.	Phonetic Full name	Date of birth Meiji / Taisho / Showa / Heisei / Reiwa year month day	
	必要な人 In cace of the Individual Certificate is requested.	Phonetic Full name	Date of birth Meiji / Taisho / Showa / Heisei / Reiwa year month day	

What kind of certificate is required and how many copies?	戸籍謄本 All Family Register copy(ies)	戸籍附票 Family Register Address History (full members / individual(s))
	戸籍抄本 Family Register copy(ies)	note: Legal domicile and Family Head's Name are included on request basis
	除籍 謄本/抄本 Removed Family Register (all members / individual(s)) copy(ies)	<input type="checkbox"/> necessary <input type="checkbox"/> unnecessary copy(ies)
	昭和・平成 改製原 謄本/抄本 Reestablished Family Register:Showa・Heisei (full members / indivisual(s)) copy(ies)	身分証明書 Civil Status Certificate: to certify that the person has a legal capacity to undertake any procedures. copy(ies)
	届出書記載事項証明書 Certificate of registered matters <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Divorce <input type="checkbox"/> Others() OF() Notification date: () year () month () day copy(ies)	受理証明書 Certificate of Acceptance (special / ordinary) <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Divorce <input type="checkbox"/> Others() Notification date: () year () month () day copy(ies)
戸籍の受附帳に記載のない証明 Certificate of not being listed in the family register reception book ※Fill in the application form attached copy(ies)	その他Others copy(ies)	

請求者 Applicant Person who needs this certificate	Address		
	Phonetic	Daytime Phone Number	
	Full name		

代理人 Attorney Relationship to the applicant () The Attorney must bring the power of attorney.	Address		
	Phonetic	Daytime Phone Number	
	Full name		

請求者と必要な戸籍との関係 Relationship between the applicant and the person whose certificate is being requested.	Myself / Spouse / Child / Grandchild / Parents / Grandparents Others () * In case of others, please specify the intended use and the place you turn in. ()
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※If there is a specific reason (i.e. inheritance: 相続) for this request, please fill in the information below: Due to the death of (Father / Mother / Grandfather / Grandmother/ Other ()) I require: <input type="checkbox"/> Koseki from birth to death. () copy(ies) <input type="checkbox"/> Koseki that shows death of the person listed above. () copy(ies)	※If you have submitted any notification within one month, check the applicable one listed below. (提出した戸籍届の種類と提出年月日) <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Divorce <input type="checkbox"/> Transfer <input type="checkbox"/> Others() OF () Notification date () month () day city, ward, town, or village the notification was submitted:
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※Please fill in the additional information (必要な記載事項がありましたらご記入ください。)

市記載欄 Official use only

確認書類 1点 2点 他	<input type="checkbox"/> 運転 <input type="checkbox"/> 旅券 <input type="checkbox"/> 個人 <input type="checkbox"/> 住基B <input type="checkbox"/> 在留 <input type="checkbox"/> 身障 <input type="checkbox"/> 他 () <input type="checkbox"/> イ <input type="checkbox"/> 保険 <input type="checkbox"/> 年金 <input type="checkbox"/> 生保 <input type="checkbox"/> 他 () <input type="checkbox"/> ロ <input type="checkbox"/> 学生 <input type="checkbox"/> 身分 <input type="checkbox"/> 資格証明 <input type="checkbox"/> 他 () <input type="checkbox"/> 他 <input type="checkbox"/> カード <input type="checkbox"/> 預金 <input type="checkbox"/> 学生 <input type="checkbox"/> 他 () 開取り <input type="checkbox"/> E <input type="checkbox"/> Z <input type="checkbox"/> K <input type="checkbox"/> KB <input type="checkbox"/> 他 ()	受付	作成	審査
権限書類 <input type="checkbox"/> 委任状 <input type="checkbox"/> 社員証 <input type="checkbox"/> 戸籍 <input type="checkbox"/> 登記事項 <input type="checkbox"/> 資格証明 <input type="checkbox"/> 他 ()	手数料	通	円	交付

For those who request Family Register, etc. by mail

If you wish to request Family Register, etc. by mail, please complete the application form, and enclose the followings.

① The Application form

② Fees

※Japanese Post Office Money Order. If you have change, we will return it by Japanese Stamps.

※Any of those who are applying from overseas, please contact us directly at the address showing below.

Fees

Certificate of All Family Register	1 copy . . . 450yen	Family Register Address History	1 copy . . . 300yen
Certificate of Family Register	1 copy . . . 450yen	Civil Status Certificate	1 copy . . . 300yen
Certified Copy of Removed Family Register	1 copy . . . 750yen	Certificate of Acceptance(ordinary)	1 copy . . . 350yen
Certified Copy of Reestablished Family Register		Certificate of Acceptance(special)	1 copy . . . 1400yen
(Showa · Heisei)	1 copy . . . 750yen		
Certificate of not being listed in the family register reception book	1 copy . . . 300yen	Others	1 copy . . . 300~750yen

③ Self-addressed stamped envelope

※An envelope that is addressed for return to the applicant (or the Attorney)

(As a general rule, the return address should be the one entered on the residence record of the applicant or the Attorney.)

④ Identity verification documents / Authority documents

●When the person himself/herself makes the request . . . a copy of identity verification documents (driver's license, etc.)

●When a Attorney makes a request . . . Identity verification documents of the Attorney and a power of attorney from the applicant.

※Please be sure that the applicant completes the power of attorney in person. (Copies are not acceptable)

※ A legal representative is requested to include an original certificate of registered matters issued within 3 months.

(The original certificate will be returned.)

Please check the enclosed documents	<input type="checkbox"/> Identification documents (driver's license, etc.)	<input type="checkbox"/> Fee	<input type="checkbox"/> Return envelope	<input type="checkbox"/> Registration certificate
	<input type="checkbox"/> Document proving the office location	<input type="checkbox"/> Evidence of the reason for the request (copy of contract, etc.)		
	<input type="checkbox"/> Power of attorney	<input type="checkbox"/> Other ()		

※If a third party (corporation, etc.) is requesting another person's Family register, please specify the reason for the request and enclose a copy of the document (contract, etc.) on which the request is based.

※When copies of family register in which the applicant is not included are requested, some documents, such as a power of attorney or related family register that can confirm the relationship between the applicant and the required family register, may be asked.

Please be aware that the application may be denied due to inadequate power of attorney, identification, and reason for the request.

※Do not forget to fill in your phone No. which must be available in daytime of weekdays.

We will get back to you if there are any unclear points in the application , however if we have trouble contacting you, the process may take longer than expected or we may not be able to fulfill the request, otherwise.

※We will not respond to unreasonable requests that may lead to an invasion of privacy.

※Please note that a person who procures a copy of a certificate through fraud or in any other unlawful manner shall be punished with a fine not exceeding 300,000 yen.

【Addressee】

〒900-8585

1-1-1 Izumizaki, Naha City, Okinawa, Japan Naha city hall Haisai civis section Mailing contact

For inquiries about the Certificate of Family register mailing service, please contact

Naha city hall Haisai civis section TEL 098-862-3274

FAX 098-860-1387

Email c-simin001@city.naha.lg.jp